

## **INSTRUCTIONS AND FORMS**

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# **ELEMENTARY SCHOOLS**

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### **COMPLETING THE WSR PLAN**

Below are instructions for completing the WSR Implementation Plan and School-based Budget. The forms are preceded by information pertaining to each form and directions for completion.

#### **A. WSR IMPLEMENTATION PLAN DEVELOPMENT CONSIDERATIONS**

In order to complete the submission, staff responsible (SMT, principal, CSA) for the WSR Implementation Plan will need to do the following:

- collaborate to develop a plan and budget that align the school's programs with the WSR model that will help students meet the CCCS;
- be knowledgeable about the programs and services needed by the school community, and the purposes and constraints on the uses of the funds under the illustrative budget;
- review and/or revise the approved 2000-2001 plan, WSR Grant Funds Application and DEPA plan to ensure its consistency with the objectives and activities to be funded;
- obtain input from WSR developers, parents, teachers, community members, advisory councils and others, as required;
- Work with district specialists (e.g., Early Childhood Education, Special Education, Bilingual/ESL, etc.) to ensure the comprehensiveness of the WSR plan in meeting the needs of all children and alignment with district plans.
- determine those areas in which student performance and behaviors are below state standards and develop objectives and benchmarks to meet state standards consistent with the requirements of the Quality Assurance Annual Report (QAAR). For objectives included in the plans to be approved by the county office, they must be consistent with the QAAR format;
- meet with school business administrators to verify the accurate completion of the budget;
- obtain assistance and input from the school's SRI team; and
- Obtain plan approval by the CSA, school principal and the SMT.

## B. SUBMISSION

➤ **NOTE: Schools in first and second cohorts are encouraged to submit the WSR Implementation Plan on or before November 1, 2000.**

No later than **December 1, 2000**, all cohort schools must submit the original and two copies of the WSR Plan and School-based Budget (with all attachments) to the appropriate PIRC noted below:

OFFICE	# OF COPIES
Joan Tomlin, Program Manager <b>PIRC-Central</b> 1090 King Georges Post Road Edison, NJ 08837	Original and 2 copies
Eunice Y. Couselo, Acting Program Manager <b>PIRC-North</b> 240 So. Harrison Street East Orange, NJ 07018	Original and 2 copies
Donna Snyder, Program Manager <b>PIRC-South</b> 1492 Tanyard Road Sewell, NJ 08080	Original and 2 copies

## C. IMPLEMENTATION PLAN AND BUDGET REVIEW

The NJDOE will review submissions, determine approval or disapproval of requests, notify appropriate agencies, and process approved submissions to ensure the following:

- the selected WSR model is progressing toward full implementation by the third year;
- program components, services and activities described are authorized and consistent with the model selected and the needs of the school community;
- expenditures support the programs described and are consistent with the costs described in the illustrative model;
- services are coordinated;
- instructional strategies enable achievement of high standards in safe learning environments;
- expenditures meet the budgetary constraints and allowable costs;
- the submission is complete, including signatures, and assurances; and
- WSR schools and LEAs are notified of final approvals.

Incomplete submissions are subject to return and will delay approval. **Once a plan and school-based budget are approved, the school-based budget must be incorporated**

### **into the district budget using Fund 15.**

Plans will be reviewed by the department to ensure that schools have followed the code requirements. All plans must do the following:

- have all cover page information and signatures;
- have all program costs consistent with the illustrative budget. Any cost outside the illustrative budget must be reallocated within the school budget, if possible, or excluded from the school budget and submitted as a particularized need;
- be based on a needs assessment. Careful consideration must be given to providing a plan that is based on the documented needs of the school; and
- include Particularized Need applications (if applicable).

The department will review all plans during the budget process and will contact the district and school to discuss the status of the plans.

### **D. WSR IMPLEMENTATION PLAN INSTRUCTIONS**

Use the forms provided in this guide for each submission component. Duplicate forms as needed. Narrative should be submitted in no smaller than 12-point type.

#### **Checklist – FORM A PROVIDED**

#### **WSR Implementation Plan Title Page and Certification – FORM B PROVIDED**

Complete the WSR Implementation Plan Title Page and attach it to the front of the WSR Implementation Plan. The Title Page provides all information necessary to identify the school and verify the amount of funds in the plan and budget.

The principal, CSA, WSR school facilitator, district business administrator and SMT chair must sign the Plan Certification on the Title Page in the appropriate section.

The budget submission must be accompanied by the CSA and board comments (if any) and the responses to each comment from the principal, developed in consultation with the SMT.

#### **WSR IMPLEMENTATION DESCRIPTION – FORM C PROVIDED**

Complete this form by succinctly responding to the questions on the processes used and decisions made in order to complete the 2001-2002 WSR Implementation Plan.

#### **WSR IMPLEMENTATION TIMELINE – FORM D PROVIDED**

Complete a one- or two-year WSR Implementation Timeline showing all components of the WSR model and leading to full implementation of the model by year three. If a waiver was granted beyond year three, explain status of implementation.

## **PARTICIPANTS IN SUBMISSION DEVELOPMENT FORM – FORM E PROVIDED**

Complete the Participants in Submission Development Form and include the name, title and signature of all individuals who participated in the development of the 2001-2002 WSR Implementation Plan and School-Based Budget.

## **CLASS-SIZE REDUCTION – FORM F PROVIDED**

Complete the class-size reduction plan by answering the questions provided on the form. It will be necessary to describe how the school will reach the required teacher-student ratios as required in code (1:21 for grades K-3, 1:23 for grades 4-8 and 1:24 for grades 9-12)

## **WAIVERS – FORM G PROVIDED**

Waivers must be submitted on an annual basis.

## **ACTIVITY PLAN – FORM H PROVIDED**

The Activity Plan forms are included in this package. A separate Activity Plan form has been provided for each element of WSR, including reducing class size.

On each Activity Plan form, state the name of the district, school, WSR model, current date and page number. The revision date will be used if revisions are necessary. Indicate the school's cohort on each form. Then complete each column:

**Goal Statement:** Create a goal relating to accomplishment of the WSR area.

**Objective:** Create an objective relating to accomplishment of the goal. (If you are developing the QAAR, use the same objective and add other objectives as needed.)

➤ It is possible to use the same objective for some of the WSR elements.

**Benchmark:** Create a benchmark relating to accomplishment of the objective.

**Activity:** Describe the tasks and activities in chronological order planned for the accomplishment of each goal and objective.

**Timeline:** Indicate the month and year the activity will be completed.

**Budget Description:** List, in detail, all expenditures necessary to complete the program, service or activity.

**Budget Amount:** Include the cost of each detailed expenditure.

**Workpaper:** Indicate the workpaper (A to X) in the 2001-2002 school-based budget that coincides with the expenditures and costs for this activity.

**Method of**

**Accountability:** Indicate the method(s) of accountability used to track the progress or completion of each activity, such as eight-week assessments, monthly reports on attendance, implementation of model components, etc.

## **EVALUATION PLAN – FORM I PROVIDED**

Describe the methods that will be used to evaluate (1) implementation progress (formative) and (2) outcomes (summative). Evaluation of implementation progress should determine to what degree the activities described in the plan have been undertaken (are they happening?). Evaluation of outcomes should determine effects on student achievement (is it working?). The school should work in collaboration with the model developer to align its evaluation methods with those of the model and with the district's Accountability Plan.

For each objective, describe the methods that will be used to determine if the strategies were successful and if the objective was met. Respond to the following *for each objective*:

- (1) State the objective.
- (2) Describe the methods to be used to measure progress towards the objective. (e.g., test scores, survey results, interview results).
- (3) State who will develop and conduct the evaluation.
- (4) State how the results will be analyzed (i.e., what are you looking for?).
- (5) State how the results will be distributed (i.e., how will you include the various stakeholders in the process?).
- (6) Provide an outline for an interim and final progress report that combines the evaluation results, and list barriers and recommendations.

## **SMT REVIEW – FORM J PROVIDED**

Complete the class-size reduction plan by answering the questions provided on the form. It will be necessary to describe how the school will reach the required teacher-student ratios as required in code (1:21 for grades K-3, 1:23 for grades 4-8 and 1:24 for grades 9-12).

## TECHNOLOGY PLAN (ASBTP) (2000 – 2002)

**NOTE:** Any schools that have an approved 1999-2001 Technology Plan, will not have to resubmit this plan but must complete the appropriate Activity Plan form (WSR Implementation 2001-2002 Activity Plan) showing the activities and related costs for 2001-2002. The activities and costs included must agree with the approved two-year plan. If adding a component which was not included in the approved two-year plan, schools must submit an activity form indicating activities of the new component, title of responsible person for implementation, budget allocation, etc.

### **THIRD COHORT SCHOOLS AND ANY SCHOOLS WITHOUT AN APPROVED TECHNOLOGY PLANS MUST:**

Complete the School-based Technology Plan using the forms and checklists provided by the Office of Educational Technology. Directions are included below.

Educational Technology is a required component of the WSR Implementation Plan and the Required Program for Secondary Schools. By completing the Abbott School-Based Technology Plan and checklist, each school will have met the technology plan requirement. The Abbott School-based Technology Plan and checklist include all substantive information necessary to determine if there is a concerted effort toward infusing educational technology into the curriculum for school year 2001-2002.

If questions arise as to the completion of this document, please contact your district technology director/coordinator or contact Linda Carmona-Bell, Office of Educational Technology, (609) 292-1414, e-mail: lcarmona@doe.state.nj.us.

#### ***Checklist Instructions:***

1. Fill in the county name, district name, and school name.
2. Indicate the whole school reform model adopted by your school.
3. Fill in the grade level of the school, the number of students in the school for school year 2000-2001, and the number of teachers in the school for school year 2000-2001.
4. Indicate the school Web site address. If the school does not have a direct Web site address, please indicate the school district's Web site address.

Note that a correlation **must** exist between the Abbott School-Based Technology Plan (ASBTP) and the District Technology Plan (DTP.) For every question asked on the checklist, enter the page numbers in the corresponding column where the information may be found in the District Technology Plan (DTP) and in the submitted Abbott School-based Technology Plan (ASBTP).

## **VISION**

The vision of the school for educational technology over the next year is to be conveyed. Also include the titles of all persons involved with working on the completion of the checklist/technology plan.

## **GOALS AND OBJECTIVES**

The goals and objectives must be linked to the school's vision over the next year. The goals and objectives need not include all of the district's goals and objectives. However, it is expected that there is a correlation of goals and objectives between the two plans.

Since the school has adopted a whole school reform model or alternative program design, show how the goals and objectives already stated reflect incorporating technology into the reform model.

## **SURVEY**

The Office of Educational Technology requested completion of educational technology surveys by each school in the spring of 2000. If a copy of the school survey is not available to be attached, complete the survey online, print it and attach a copy to the checklist/technology plan. The survey may be obtained from the NJDOE Web site: [http://www.state.nj.us/njded/techno/survey/results/form\\_sample.htm](http://www.state.nj.us/njded/techno/survey/results/form_sample.htm). This survey serves as the needs assessment component for this element of WSR.

## **IMPLEMENTATION STRATEGIES/ACTIVITY NARRATIVE**

Describe the efforts of the school to acquire and maintain equipment (e.g., servers, computers, printers, scanners), building wiring and networking items. (It may include telecommunications wiring, networking the school or connecting the school to the district network.)

Describe the professional development schedule or plan for all school employees for school year 2001-2002.

## **IMPLEMENTATION STRATEGIES/ACTIVITY/BUDGET TABLES**

The table is available on the department's Web site under the Abbott School-Based Technology Plan Checklist at:

<http://www.state.nj.us/njded/techno/localtech/index.html>

Download the table and complete each section. Be sure to include the goal and objective to which the strategy and activity are related. Indicate the strategies that will lead to the accomplishment of the objective and the specific activities that occur in the classroom using technology.

The activities when linked to appropriate objectives must include, as a minimum, professional development, examples of infusing technology into the adopted WSR model and the curriculum, acquisition and maintenance of hardware, software and all

related technology items such as wiring, network access, telecommunications and facilities.

Indicate the relationship of the Core Curriculum Content Standards (CCCS) to the strategy/activity. The department's numbering system for the CCCS may be used. The CCCS is found on the department's Web site at: [www.state.nj.us/education](http://www.state.nj.us/education)

Indicate title of the person **directly** involved with implementing the strategy/activity.

Provide the funding source and budget detail (e.g., # computers @ per-unit cost = total dollar amount) proposed for 2001-2002 associated with implementing the strategy/activity. The funding source may be referenced by the FUNDING SOURCE KEY provided at the bottom of the table.

Provide the workpaper reference letter indicating on which budget workpaper these costs will be listed.

Indicate the month and year for which the strategy/activity has or will occur.

## EVALUATION PLAN

The table is available on the department's Web site under the Abbott School-Based Technology Plan Checklist at:

<http://www.state.nj.us/njded/techno/localtech/index.html>

Download the table and complete each section. Be sure to include the goal to which the objective is related.

For each objective noted in the Goals and Objectives section, indicate the tools or criteria that will be used to determine if the objective was successful. Outcome-based results (i.e., student report, curriculum change) may be used as an evaluative measure.

Indicate the title of the person(s) directly involved with conducting and analyzing the evaluation results for each objective.

Indicate the month and year when the evaluation will occur.

## SIGNATURES

There is a need to ensure that all involved with the implementation of the school's technology plan are familiar with its contents. Therefore, the completed document is to be reviewed, signed and dated by an SMT representative, the school principal, and the district's technology director/coordinator.

Provide the name of the person **most familiar** with the technology plan in the event that clarifications or revisions are needed. Include the name, title, direct telephone number and e-mail address. Note that e-mail is the preferred method of communication by the Office of Educational Technology to the contact person.

## CHECKLIST

### A. SUBMISSION CHECKLIST FOR WSR IMPLEMENTATION PLAN

Use this checklist to ensure that the contents of your WSR Implementation Plan submission package is complete. Submission of all plan pages is required on an annual basis. Incomplete submissions may delay approval of your plan. A complete copy of the instructions and forms is located on the NJDOE Web site:

<http://www.state.nj.us/njded/abbotts/guide/>

A feature has been built in to assist you in tracking the date of each draft during the preparation process. In the footer at the bottom of the page for each form, there is a place to enter a date. This date will automatically change every time the document is accessed, thereby keeping track of updated revisions.

- \_\_\_\_\_ Title Page Form B
- \_\_\_\_\_ Assurances and Certification
- \_\_\_\_\_ WSR Implementation Plan Description Form C
- \_\_\_\_\_ WSR Implementation Timeline Form D
- \_\_\_\_\_ Participants in Submission Development Form E
- \_\_\_\_\_ Class-size Reduction Plan Form F
- \_\_\_\_\_ See Waiver below Form G
- \_\_\_\_\_ 2001-2002 Activity Plans Form H
- \_\_\_\_\_ Evaluation Plan I
- \_\_\_\_\_ Budget Summary
- \_\_\_\_\_ Budget Detail
- \_\_\_\_\_ Technology Plan

#### TITLE I

Is the school a Title I Schoolwide Program? \_\_\_\_\_ Yes \_\_\_\_\_ No

#### WAIVER REQUEST INCLUDED

Waiver included

*Specify*

**PARTICULARIZED NEEDS REQUEST INCLUDED** \_\_\_\_\_ Particularized need(s) included

*Specify*

**NEW JERSEY DEPARTMENT OF EDUCATION****B. WSR IMPLEMENTATION PLAN TITLE PAGE**

WSR MODEL:	CURRENT DATE:	REGION:     __North   __Central   __South
COHORT: __1 <sup>ST</sup> __2 <sup>ND</sup> __mid-yr. 2 <sup>nd</sup> __3 <sup>rd</sup>		APPROVED TITLE I SCHOOLWIDE: ____Yes ____No
COUNTY:		COUNTY CODE:
DISTRICT:	DISTRICT CODE:	SCHOOL:                      SCHOOL CODE:
DISTRICT CONTACT:		SCHOOL PRINCIPAL:
DISTRICT CONTACT PHONE:		PRINCIPAL PHONE:
DISTRICT CONTACT FAX:		PRINCIPAL FAX:
DISTRICT CONTACT EMAIL:		PRINCIPAL E-MAIL:
DISTRICT BUSINESS ADMINISTRATOR NAME:		SCHOOL ADDRESS—CITY, STATE, ZIP
DISTRICT BUSINESS ADMINISTRATOR PHONE/FAX:		GRADE SPAN OF SCHOOL: Grades ____ - ____ Elementary____ Middle ____ High School ____
DISTRICT ADDRESS—CITY, STATE, ZIP		TOTAL SCHOOL-BASED BUDGET FUNDS:
<b>ASSURANCES</b>		
To the best of my knowledge and belief, the information contained in the WSR Implementation Plan and School Based Budget is true and correct. I further certify that I have reviewed and submitted comments to the School Management Team regarding the WSR Implementation Plan and School-Based budget. The following are attached: Assurances, WSR Implementation Description, WSR Timeline, Participants in Application Development Form, 2001-2002 Activity Plan, Revised Required Programs in Secondary Schools Plan and RPSS required forms (if applicable), Evaluation Plan, Budget Summary, Budget Workpapers, Technology Plan, Accountability Plan and Class Size Reduction Plan.		
Signature of School Principal & Date:		Signature of WSR School Facilitator & Date:
Signature of Chief School Administrator & Date:		Signature of Business Administrator & Date:
The WSR Implementation Plan and School-Based Budget has been duly authorized by the SMT of the _____ School. We have included the copies of the WSR Implementation Plan and School-Based Budget as required.		
Signature of SMT Chair:		SMT Chair Address:
SMT Chair Fax:		SMT Chair Phone:
<b>Due Date: DECEMBER 1, 2000</b>		

**NEW JERSEY DEPARTMENT OF EDUCATION  
WHOLE SCHOOL REFORM**

**C. IMPLEMENTATION DESCRIPTION**

**Duplicate this page as needed.**

District:		School:
Cohort: ____1 <sup>st</sup> ____2 <sup>nd</sup> ____mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>		WSR Model:
# SP. ED. TEACHERS:	# SP. ED. AIDES:	CURRENT # SECURITY GUARDS:
# SELF-CONTAINED SP. ED. CLASSROOMS:	CURRENT # TEACHERS:	CURRENT # ADMINISTRATORS:

Complete this form by succinctly responding to the following questions on the processes used and decisions made in order to complete the 2001-2002 WSR Implementation Plan:

1. How was your needs assessment completed and used by the SMT to develop the WSR Implementation Plan?
2. What existing programs will be continued and which will no longer be needed based on the requirements of the developer and the components of the WSR model selected or alternative program design?
3. What programmatic decisions were used by the SMT to reallocate fiscal and staff resources?
4. How will the current plan accomplish full implementation of the WSR model or alternative program design by the third year?
5. What revisions, if any, were made to the plan from the previous year?
6. What strategies will be used to accomplish class-size reduction and increased attendance rates of students.
7. What are the goals and objectives, the projected outcomes, waivers needed, and any particularized needs?
8. What barriers must be overcome to effectively implement your proposed plan?

**NEW JERSEY DEPARTMENT OF EDUCATION  
WHOLE SCHOOL REFORM****D. IMPLEMENTATION TIMELINE**

District:	School:
Cohort: ____1 <sup>st</sup> ____2 <sup>nd</sup> ____mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>	WSR Model:

Complete a one-or two-year WSR Implementation Timeline showing all components of the WSR Model being implemented each year and leading to full implementation of the model by year three. The timeline should be developed in consultation with the WSR model developer. Any 1<sup>st</sup> or 2<sup>nd</sup> cohort schools that were granted waivers to their initial timeline must explain the current status of implementation.

NEW JERSEY DEPARTMENT OF EDUCATION  
WHOLE SCHOOL REFORM

E. PARTICIPANTS IN THE SUBMISSION DEVELOPMENT

District:	School:
Cohort: ____1 <sup>st</sup> ____2 <sup>nd</sup> ____mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>	WSR Model:

The following School Management Team members and other stakeholders participated in the development of the WSR Implementation Plan & Budget (if applicable):

NAME	TITLE	SIGNATURE

**NEW JERSEY DEPARTMENT OF EDUCATION  
WHOLE SCHOOL REFORM****F. CLASS-SIZE REDUCTION PLAN**

District:	School:
Cohort: ____1 <sup>st</sup> ____2 <sup>nd</sup> ____mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>	WSR Model:

a) Describe your plan for reducing class sizes to the required levels of 1:21 for Grades K-3, 1:23 for Grades 4-8 and 1:24 for Grades 9-12. By September 1, 2002 b) Indicate class sizes for each grade for 2000-2001 and 2001-2002 and the year that the required levels will be achieved. c) Indicate any barriers to plan accomplishment and how the school/district will resolve these. d) How will the district's facility plan affect class reduction?

**NEW JERSEY DEPARTMENT OF EDUCATION  
WHOLE SCHOOL REFORM**

**G. WAIVER REQUEST FORM**

District:	School:
Cohort: ____1 <sup>st</sup> ____2 <sup>nd</sup> ____mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>	WSR Model:

A one-year equivalency or waiver to the rules must meet the following criteria:

1. The spirit and intent of *N.J.A.C. 6A:24* are served by granting the equivalency or waiver;
2. The provision of a thorough and efficient education to the students in the district and the implementation of the *Abbott* court remedy is not compromised as a result of the equivalency or waiver; and
3. There will be no risk to student health, safety or civil rights by granting the equivalency or waiver.

**Summarize waivers requested and the reason for the request on this form**

**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
**G. 2001-2002 ACTIVITY PLAN**

District: _____	School: _____
Cohort: ____1 <sup>st</sup> ____2 <sup>nd</sup> ____mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>	WSR Model: _____
WSR Element #1: IMPROVED STUDENT PERFORMANCE/WSR Element #2: RESEARCH-BASED PROGRAM	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
1						
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: _____ 1 <sup>st</sup> _____ 2 <sup>nd</sup> _____ mid-yr. 2 <sup>nd</sup> _____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #3: SCHOOL-BASED LEADERSHIP AND DECISION-MAKING	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid-yr. 2 <sup>nd</sup> ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #4: INTEGRATION AND ALIGNMENT OF SCHOOL FUNCTIONS	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
**2001-2002 ACTIVITY PLAN – ONLY FIRST & SECOND COHORT SCHOOLS**

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #5: EDUCATIONAL TECHNOLOGY	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Page # in SBTP	Budget Description	Budget Detail Amount	Work-paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid-yr 2 <sup>nd</sup> ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #6: PROFESSIONAL DEVELOPMENT	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work- paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid-yr 2 <sup>nd</sup> ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #7: SAFE SCHOOL ENVIRONMENT CONDUCTIVE TO LEARNING	
Goal Statement: _____	
Objective: _____	
Benchmark: _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work- paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid-yr 2 <sup>nd</sup> ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #8: STUDENT AND FAMILY SERVICES & COORDINATION OF RESOURCES	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work- paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid-yr 2 <sup>nd</sup> ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Element #9: REWARD SYSTEM	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
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**WHOLE SCHOOL REFORM IMPLEMENTATION PLAN**  
2001-2002 ACTIVITY PLAN

District: _____	School: _____
Cohort: ____ 1 <sup>st</sup> ____ 2 <sup>nd</sup> ____ mid-yr 2 <sup>nd</sup> ____ 3 <sup>rd</sup>	WSR Model: _____
WSR Component: CLASS SIZE REDUCTION PLAN	
Goal Statement: _____	
Objective: _____	
<b>Benchmark:</b> _____	

#	Activity	Timeline	Budget Description	Budget Amount	Work-paper	Method of Accountability
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## NEW JERSEY DEPARTMENT OF EDUCATION

**WHOLE SCHOOL REFORM****I. EVALUATION PLAN**

District:	School:
Cohort: _____ 1 <sup>st</sup> _____ 2 <sup>nd</sup> _____ mid-yr 2 <sup>nd</sup> _____ 3 <sup>rd</sup>	WSR Model:

Describe the methods that will be used to evaluate (1) implementation progress (formative) and (2) outcomes (summative). Evaluation of implementation progress should determine to what degree the activities described in the plan have been undertaken (are they happening?). Evaluation of outcomes should determine effects on student achievement (is it working?).

Describe what measures will be used, who will develop and conduct the evaluation, when and how often the evaluation will occur, and how results will be used.

## WSR IMPLEMENTATION PLAN – SMT REVIEW

### For Elementary and Secondary Schools

This form should be used by the SMT to ensure that the plan and budget submitted to the Department of Education (DOE) are complete and comprehensive. SUBMIT THIS FORM WITH THE PLAN. Incomplete plans and/or budgets may delay approval or lead to disapproval by the DOE.

	WSR PLAN COMPONENT	QUESTION	YES/NO
1.	Title Page	Are all sections completed correctly?	
2.	Assurances & Approval	a. Have the CSA, Principal and SMT Chair provided assurances for the plan?	
		b. Have comments of the board and CSA (if any) and the school's responses been attached?	
		c. Are the assurances understood and signed by appropriate individuals?	
3.	WSR Description	Is the description of the following adequate and does it contain all necessary components?	
		a. A summary of the needs assessment?	
		b. A summary of the inventory of programs and services?	
		c. Is there a description of existing programs that will be continued?	
		d. Is there a description of programs no longer needed based on the requirements of the developer and the components of the WSR model selected?	
		e. Is there a description of how the SMT's programmatic decisions were used to reallocate fiscal and staff resources?	
		f. Is it clear how the plan accomplishes full implementation by the 3 <sup>rd</sup> year?	
		g. Have any revisions made to the plan from the previous year been explained?	
		h. Is there a summary of strategies for class-size reduction for elementary and secondary schools?	
		i. Are there strategies for increased graduation rates for secondary schools?	
		j. Are there strategies for improved attendance rates for secondary schools?	
		k. Are there strategies for decreased dropout rates in secondary schools?	
		l. Is there a summary of the goals, objectives, outcomes, waivers (if applicable) and particularized needs (if applicable)?	
4.	WSR Timeline	Has a timeline been included that shows full implementation of all WSR model components by the 3 <sup>rd</sup> year?	

<b>5.</b>	<b>Participants in Plan Development</b>	Were the following individuals or groups involved in the plan development to the fullest extent?	
		a. SMT chair?	
		b. School staff?	
		c. Parents?	
		d. Community members?	
		e. District WSR Liaison	
		f. District technology coordinator?	
		g. District bilingual/ESL specialist?	
		h. District workplace readiness	
		i. District special education specialist?	
		j. District early childhood specialist?	
		k. District Title I office?	
		l. District business administrator?	
		m. Other stakeholders?	
<b>6.</b>	<b>Instructions</b>	a. Was the plan developed in accordance with the WSR Implementation Plan/Instructions?	
		b. Was the plan developed in accordance with the developer's requirements?	
<b>7.</b>	<b>ACTIVITY PLAN</b>	Does the plan include the following:	
	<b>Goals</b>	a. Appropriate goals?	
	<b>Objectives</b>	b. Measurable objectives?	
		c. Objectives for all areas in which the school has not met state student performance standards?	
	<b>Activities</b>	d. Adequate activities to achieve objectives?	
		e. Adequate timelines to accomplish activities?	
		f. Budget data that corresponds to expenditures on the School-based Budget workpapers?	
		g. An evaluation plan for accomplishment of each activity and objective? Is the plan consistent with the elements of WSR?	
		h. Improved student performance?	
		i. Research-based program?(integrated into other elements)	
		j. School-based leadership and decision making?	
		k. Integration and alignment of school functions?	
		l. Educational technology?	
		m. Professional development?	
		n. Safe school environment conducive to learning?	
		o. Student and family services/coordination of resources?	
		p. Reward system?	
<b>8.</b>	<b>Articulation</b>	Do the activities ensure that curriculum is aligned with the CCCS and is articulated among the grades in the school?	
<b>9.</b>	<b>High School Transition</b>	If applicable, do the activities indicate collaboration with the middle or high school that students will attend to ensure a smooth transition to the next grade level?	
<b>10.</b>	<b>Early Childhood Transition</b>	If applicable, do the activities indicate collaboration with the early childhood education program that students will attend to ensure a smooth transition between levels?	
<b>11.</b>	<b>Other Plans</b>	Have the following other plans been included and are the plans effective and adequate?	
		a. Technology Plan?	
		b. Designation of a full-time technology coordinator?	
		c. Class-Size Reduction Plan?	

<b>12.</b>	<b>Evaluation</b>	Are the methods used to evaluate progress and outcomes of goals and objectives adequate?	
		a. Are methods used to evaluate student outcomes adequate?	
		Does the evaluation plan address the following?	
		Student achievement?	
		Student attendance?	
		Grade promotion?	
		Graduation? (secondary only)	
		Suspension?	
		Expulsion rates?	
		Dropout rates? (secondary only)	
		Stakeholder support?	
		Parental participation?	
		Technology integration?	
		Rewards?	
		Continuous staff development?	
		Access to health and social services?	
		Placements in alternative education?	
		Placements through School-to-Work or College?	
		Class size?	
		Combination of research-based strategies for high schools incorporated in the school?	
<b>13.</b>	<b>Budget</b>	Does the budget integrate all local agency resources in a cost-effective manner?	
		Has the following information been completed correctly?	
		School type?	
		Current school enrollment?	
		Projected school enrollment?	
		Name of the WSR model?	
<b>14.</b>	<b>General</b>	Has the following information been completed correctly on the summary and workpapers?	
		a. Funding sources?	
		b. FTEs?	
		c. Salaries?	
		d. Benefits?	
		e. All workpapers?	
		f. Transfer of costs from Activity Plan to Workpapers and Workpapers to Activity Plan?	
		g. Transfer of costs from Workpapers to Budget Summary?	
		h. Are the funding sources listed permitted by federal or state guidelines to be used for WSR?	
		i. Where ECPA funds are included as a funding source, is their use consistent with the approved ECP plan?	
		j. Is the method for estimating salary and benefits clearly explained?	

# **ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)** **IMPLEMENTATION STRATEGIES/ACTIVITY/ BUDGET TABLES** **SCHOOL YEAR 2000-2002**

**District Name:** \_\_\_\_\_ **School Name:** \_\_\_\_\_

**Goal:** \_\_\_\_\_

**Objective:** \_\_\_\_\_

The ACTIVITIES listed **must include:** professional development; specific examples of infusion of technology into the adopted WSR model and the curriculum; and acquisition and maintenance of hardware, software and all related technology items such as wiring, network access, maintenance, telecommunications fees, and facilities. **NOTE:** Each item in the budget detail must also appear in the corresponding workpaper.

Strategy/ Activity	CCCS related to Strategy Activity	Title of person(s) that will implement strategy or activity	Budget detail and funding source (see KEY)	Work- paper	Timeline 2000-2001 or 2001-2002

<b>FUNDING SOURCE KEY:</b> School Funding = S District Funding = D Grant Funding = G Other Funding = O, please specify in table
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## ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)

### BUDGET SUMMARY

SCHOOL YEARS 2000 - 2002

**District Name** \_\_\_\_\_ **School Name** \_\_\_\_\_

List all expenditures from the **Implementation Strategies/Activity/ Budget Tables** including budget details, total allocation, funding source (e.g., District, State, etc.) and workpaper reference letter

BUDGET ITEM & table page #	Detail or Cost Breakout	Total Allocation	Funding Source (see key in table)	Workpaper Reference

Revision Date \_\_\_\_\_ Page \_\_\_\_ of \_\_\_\_

**ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)**  
**EVALUATION PLAN**  
**SCHOOL YEAR 2000-2002**

**District Name:** \_\_\_\_\_ **School Name:** \_\_\_\_\_

**GOAL:** \_\_\_\_\_

OBJECTIVE (Refer to the ASBTP implementation strategies/activity budget table)	Tools or criteria used to determine the success of the objective	Person(s) that will evaluate the objective	Timeline for Evaluation (Indicate month and year)

**ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)****CHECKLIST AND REVIEW FORM FOR 2000-2002**

County: \_\_\_\_\_ District: \_\_\_\_\_

School Name: \_\_\_\_\_

Adopted Whole School Reform Model: \_\_\_\_\_

School grade level: \_\_\_\_\_ Number of students in school: \_\_\_\_\_ Number of teachers in school: \_\_\_\_\_

School and/or district Web site address: \_\_\_\_\_

Page # in ASBTP	Page # in DTP	For NJDOE Use ONLY		LINK ALL OF THE FOLLOWING SCHOOL-BASED TECHNOLOGY PLAN (ASBTP) COMPONENTS TO THE DISTRICT TECHNOLOGY PLAN (DTP)
		NO	YES	
				<b>VISION</b> <ul style="list-style-type: none"> <li>What is the <b>vision</b> for technology in your school over the next two years?</li> <li>List the titles of all <b>persons involved</b> in the development of the school's 2001-2002 technology plan.</li> </ul>
				<b>GOALS AND OBJECTIVES (through 2001)</b> <ul style="list-style-type: none"> <li>What are the school's goals and objectives? Be sure to <b>link them to the district technology plan's</b> goals and objectives.</li> <li>Describe how the adopted model is <b>incorporated into your school's goals and objectives</b> for technology?</li> </ul>
				<b>SURVEY</b> <ul style="list-style-type: none"> <li>Attach a copy of the completed school survey form from NJDOE's 2000 School Technology Survey.</li> </ul>
				<b>IMPLEMENTATION STRATEGIES/ACTIVITY NARRATIVE</b> <ul style="list-style-type: none"> <li>Describe how the school is <b>acquiring and maintaining all equipment, including wiring for buildings and networking items.</b></li> <li>Describe the <b>professional development activities for teachers, administrators, and school library media personnel</b> for 2001-2002.</li> </ul>
				<b>IMPLEMENTATION STRATEGIES/ACTIVITY/BUDGET TABLES</b> Complete the ASBTP Evaluation Plan to describe the implementation strategies and educational technology school-based activities/ link with the CCCS/ responsible party/timeline/ and costs for the 2001-2002 school year.
	N/A			<b>BUDGET SUMMARY PAGE</b> List all expenditures from activity tables and indicate amounts, including budget details, total allocation, funding source and workpaper reference.
				<b>EVALUATION PLAN</b> Complete the ASBTP Evaluation Plan to describe how the evaluation of the goals and objectives for technology in your school will be accomplished.

**Reviewed by:**

\_\_\_\_\_  
*Signature of SMT Representative* Date: \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
*Signature of School Principal* Date: \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
*Signature of District Technology Director/Coordinator* Date: \_\_\_\_\_ E-mail: \_\_\_\_\_

**The person to contact for questions about the school technology plan: (PLEASE PRINT)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

**APPLICATION**

**LOCAL PARTICULARIZED NEED FOR  
SUPPLEMENTAL PROGRAM OR SERVICE**

**INSTRUCTIONS AND FORMS**

**David C. Hespe  
Commissioner of Education**

**Barbara Anderson  
Assistant Commissioner  
Division of Student Services**

**Thomas McMahon  
Assistant Commissioner  
Division of Finance**

**Submission Due Date:  
December 1, 2000**

**To be submitted with  
Whole School Reform Implementation Plan  
Required Programs in Secondary Schools Plan**

**NEW JERSEY DEPARTMENT OF EDUCATION  
PO Box 500  
Trenton, NJ 08625-0500**

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## INTRODUCTION

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### A. LOCAL PARTICULARIZED NEED

A local particularized need is one characterized by the following:

- is supported by an assessment of needs of a specified population of students in a given school or for early childhood programs in the district;
- has been demonstrated to be the cause of student failure in achieving the Core Curriculum Content Standards;
- can be remedied or corrected by a program or service, that has been formally evaluated to demonstrate its effectiveness; and
- is not effectively addressed by a WSR model or a whole school alternative program design nor by the required secondary programs.

- **A particularized need is school-based.**
  - **Supplemental funding is district-based.**

Subsequent to the completion of the WSR implementation plan or the Required Programs in Secondary Schools plan, the School Management Team (SMT) may consider whether there exists a particularized need for further supplemental educational programs or services which are essential to ensure students' educational success and without which students cannot achieve the Core Curriculum Content Standards (CCCS). If such a need is determined, the SMT is responsible for providing a recommendation to the local board of education.

Administrative Code provides that, upon determination by the school board that a school has demonstrated a particularized need for an essential program or service, the school board must submit to the Department of Education (DOE) a proposed programmatic plan to address the particularized need. The purpose of this plan is to determine the required elements. The board's request for reallocation or additional funds to support a particularized need will be reviewed by the DOE in the context of the district budget review process.

**NO PROGRAMS OR SERVICES BEYOND THOSE REQUIRED BY THE WSR MODEL OR APPROVED DESIGN SHALL BE APPROVED UNLESS A PARTICULARIZED NEED IS DEMONSTRATED PURSUANT TO N.J.A.C. 6A:24A-5.1.**

## STATE REGULATIONS SUMMARY

The applicable sections of Chapter 6A:24 for a local particularized need include:

- 1.2 – Definitions
- 2.3 - Training of School Management Team Members
- 3.4 - Early Childhood Program Operational Plan
- 4.2 - Whole School Alternative Program Design
- 4.3 - Submission of WSR Implementation Plan
- 4.4 - School-based Budgets
- 5.1 - Demonstration of Particularized Need
- 5.2 - Application for Supplemental Programs or Services
- 6.1 - Implementation of Required Programs in Secondary Schools
- 7.1 - Application for Additional State Aid
- 8.1 - Long-range Facilities Plan

## B. APPLICATION FOR LOCAL PARTICULARIZED REVIEW

The New Jersey Department of Education (NJDOE) will review submissions to ensure the following:

- required sections are complete and accurate;
- particularized needs described are supported by an assessment of student needs;
- particularized needs described have been shown to be the cause of student failure in achieving the CCCS;
- programs or services proposed as the remedy are documented by evidence showing they have worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need and are not provided by the WSR model or Required Programs in Secondary Schools;
- expenditures support the programs described and are not provided within the illustrative budget or Required Programs in Secondary Schools;
- the submission is complete, including signatures, assurances; and
- SMTs and LEAs are notified of final approvals.

Incomplete submissions may delay approval of the application or lead to disapproval. Once a Local Particularized Need Plan is approved it must be incorporated into the district budget using Fund 15.

## C. PLAN APPROVAL PROCESS

Plans will be reviewed by the department to ensure that schools have followed the code requirements. All plans must:

- have all cover page information and signatures;
- be based on a comprehensive needs assessment. Careful consideration must be given to providing a plan that is based on the documented needs of the identified student population; and
- have attached all required justifications, descriptions, and supporting documentation.

The department will review all plans during the budget process and will contact the district and school to discuss the status of their plans.

The following are the steps in the approval process of local particularized needs:

Step 1. Needs Assessment indicates a Particularized Need should be submitted;

Step 2. SMT consults with principal and CSA and considers if a demonstrated particularized need exists.

Step 3. Determination of Particularized Need by SMT includes:

- A. Assessment of student achievement of CCCS;
- B. Where the CCCS are not being met a determination that failure of those students is caused by a particularized needs that are not capable of being addressed by existing WSR or required secondary programs at the school level;
- C. Inventory of currently used programs and services targeted to the area(s) of need, together with an assessment of their effectiveness and efficiency in meeting such need, and an explanation as to why they are insufficient to meet the identified needs;
- D. Review of community resources which could be used to address the identified areas of need and an explanation as to how they are being used or why they are not being used.

Step 4. SMT recommends to the board, with a copy to the SRI, the appropriate supplemental programs and services, which shall be documented by evidence that the programs and services have worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need.

Step 5. The board responds to SMT in writing:

- A. In those instances where a board does not agree that the SMT has demonstrated a particularized need, the board shall provide to the SMT a detailed statement of the reasons for its determination.
- B. In those instances where the board determines that a particularized need for a recommended supplemental program or service has been demonstrated, the board shall submit its proposed plan for the program to the Department for approval in accordance with provisions of N.J.A.C. 6A:24-7.1
- C. In those instances where a board determines that resources are

insufficient to support the supplemental programs or services approved pursuant to *N.J.A.C. 6A:24-5.2* after all possible reallocation at the school and district levels have been made, the board shall apply to the department for additional state aid in accordance with the requirements of *N.J.A.C. 6A:24-7.1*

Step 6. The board submits its proposed plan for the program or service to the department for approval. Applications for such approval shall be submitted on forms provided by the department and shall at a minimum include:

- A. The particularized needs forms;
- B. A demonstration that one or more public hearings have been held in order to obtain parent, student, teaching staff and citizen input on the application;
- C. A general description of the supplemental program(s) or service(s) and an explanation of the particularized need(s) which shall be met in order to enable those students to achieve the Core Curriculum Content Standards;
- D. A demonstration that the supplemental program(s) or service(s) is documented by evidence that the program(s) or service(s) have worked successfully in the school and/or in other schools with similar characteristics and is proven to address the identified need(s);
- E. A plan for evaluating the continuing effectiveness and efficiency of the supplemental program(s) or service(s);
- F. A demonstration that the requested supplemental programs or services will not delay or impede implementation of, and does not duplicate, WSR or secondary programs and services required;
- G. A recommendation of elimination or modification of existing programs or services identified as less than effective and efficient, or which would overlap with proposed new program or service; and
- H. An operating budget for the purpose of the supplemental program(s) or service(s).

Step 7. Supplemental programs or services that are not approved by the department pursuant to *N.J.A.C. 6A:24-5.2* cannot be included in a district wide budget that requests additional state aid pursuant to *N.J.A.C.6A:24-7.1*.

- A. Any application for supplemental programs or services denied by the department may be appealed to the Commissioner pursuant to the provisions of *N.J.A.C. 6A:24-9.1*.

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## INSTRUCTIONS

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The board must submit a separate application for each discrete or unrelated particularized need for a supplemental program or service. Separate applications are required for each school within a district even though two or more schools may have demonstrated very similar particularized needs. A signed board resolution must be submitted with the application. At a minimum, the programmatic plan for a particularized need should include:

1. Cover Page- Form Provided

Insert the date of the signed board resolution in the space provided.

2. Definition of Identified Particularized Need

3. Program Description

Provide the following in the Program Description:

- a description and explanation of the particularized need that the programs or services proposed as the remedy will address to enable the identified students to achieve the CCCS;
- a description of how the requested supplemental program will not delay or impede implementation of, nor duplicate, WSR programs, Required Programs in Secondary Schools, or other services required elsewhere in the regulations;
- a description of the district's plan for incorporating the program or service into subsequent regular budgeting cycles; and
- inventory and assessment of all such existing programs that have not been already included in the WSR Implementation Plan or Required Programs in Secondary Schools;

4. Description of Methods and Results

Describe the methods and results of the student needs assessment underlying the request, including an identification of the specific population(s) to be served.

5. Justification

Provide a justification that shows that the needs to be addressed cannot

be met through existing WSR or Required Programs in Secondary Schools. This justification should include the following:

- Supporting documentation that confirms the results of the inventory and assessment;
- Explanation for why each existing WSR or RPSS program is insufficient to meet the identified need.
- If the application is for on-site health and social services, an explanation as to why the program cannot be provided efficiently or effectively off site.

#### 6. Detailed Activity Plan – Form Provided

On each Activity Plan form, state the name of the district, school, WSR model or Required Program in Secondary Schools area, current date and page number. The revision date will be used if revisions are necessary. Indicate cohort or Non-WSR secondary school on each form. Complete the following for each page of the Activity Plan:

- create a goal, objective and benchmark relating to accomplishment of the particularized need;
- describe the tasks and activities in chronological order planned for the accomplishment of each goal and objective in the Activity Column;
- indicate the month and year the activity will be completed in the Timeline Column;
- list, in detail, all expenditures necessary to complete the activity in the Budget Description Column;
- include the cost of each detailed expenditure in the Budget Amount Column;
- indicate the GAAP code and workpaper from the school-based budget form which coincides with the expenditures and costs for this activity; and
- indicate in the Evaluation Column the anticipated result/outcome & specific data that will track the impact of each program or service.

#### 7. Budget – Form Provided

A detailed plan and budget for the proposed program or service, including staffing, supplies, facilities and other considerations, as well as a demonstration, where appropriate, of compliance with applicable law. A separate budget form (attached) must be submitted for each particularized need submitted by a school.

An identified particularized need may be funded with current resources, the reallocation of existing resources and/or a request for additional supplemental funds. Current existing resources may include allowable federal, state, and local resources including funds for one-time expenditures in the 2000-2001 budget that will not be continuing in the 2001-2002 (e.g., major renovations, computer purchases, rewiring). The request for supplemental funds for an

identified need must address all possible funding sources. If the identified need cannot be addressed with current resources, a district may request supplemental funding.

Complete a budget statement for the identified particularized need. In the spaces provided, include a breakdown of all existing resources that will be allocated for the particularized need by funding source and the amount that is being reallocated. If additional funds are being requested, indicate the estimated amount. The total for all identified resources should agree with the total amount for the particularized need. The amounts provided are estimates. Actual requests for supplemental funding will be made through a separate application process that will be part of the February budget submission. Those districts making supplemental funding requests will be asked to identify other programs, services and expenditures that would have to be eliminated if supplemental funding is not provided. **Once approved, appropriations for particularized needs cannot be eliminated.**

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## FORMS

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<b>A. SUBMISSION CHECKLIST FOR THE APPLICATION FOR LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE</b>
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Use this checklist to ensure that the contents of your Particularized Needs submission package are complete.

- \_\_\_\_\_ Cover Page (Form Provided)
- \_\_\_\_\_ Definition of Identified Particularized Need
- \_\_\_\_\_ Program Description
- \_\_\_\_\_ Description of Methods and Results of Student Needs Assessment
- \_\_\_\_\_ Justification Showing that WSR Model or Required Secondary Program Does Not Address Student Need
- \_\_\_\_\_ Inventory and Assessment of All Existing Programs
- \_\_\_\_\_ Supporting Inventory and Assessment of all Existing Programs Documentation
- \_\_\_\_\_ Explanation for Why Each Existing Program Does Not Meet Particularized Student Need
- \_\_\_\_\_ Health and Social Service Request--Explanation Why the Program Cannot Be Provided Effectively Off Site
- \_\_\_\_\_ Detailed Activity Plan (Form Provided)
- \_\_\_\_\_ Budget (Form Provided)

**NEW JERSEY DEPARTMENT OF EDUCATION  
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE  
B. COVER PAGE**

SCHOOL:		NAME OF PROPOSED PARTICULARIZED NEED PROGRAM:	
DISTRICT:		POPULATION SERVED:	
COHORT: ____1 <sup>st</sup> ____2 <sup>nd</sup> mid-yr. 2 <sup>nd</sup> ____3 <sup>rd</sup>	WSR MODEL:	SECONDARY SCHOOL: ____ MIDDLE ____ HIGH GRADES SERVED: ____ TO ____	
CURRENT DATE:		REGION: ____ North ____ Central ____ South	
DISTRICT CONTACT:		GRADE SPAN OF SCHOOL:	
DISTRICT CONTACT PHONE:		SCHOOL PRINCIPAL:	
DISTRICT CONTACT FAX:		PRINCIPAL PHONE:	
DISTRICT CONTACT E-MAIL:		PRINCIPAL FAX:	
SCHOOL ADDRESS:		PRINCIPAL E-MAIL:	
DISTRICT BUSINESS ADMINISTRATOR NAME:		STATE, ZIP	
DISTRICT ADDRESS—CITY, STATE, ZIP		DISTRICT BUSINESS ADMINISTRATOR PHONE/FAX:	
		TOTAL FUNDS REQUESTED:	
<b>CERTIFICATION</b>			
To the best of my knowledge and belief, the information contained in the Local Particularized Need for Supplemental Program/Service Application is true and correct.			
Certification of School Principal:			
Certification of WSR School Facilitator:			
Certification of Chief School Administrator:			
Certification of Board of Education:			
The Local Particularized Need Application has been duly authorized by the SMT of the _____ School. We have included the copies specified in the instructions			
Certification of SMT Chair:			
SMT Chair Address:		SMT Chair Phone:	
Local Particularized Needs Applications must be included with the WSR Implementation Plan or RPSS Plan and received by:			
<b>December 1</b>			

**ACTIVITY PLAN**  
**FOR LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE**

Duplicate as required.

District:	School:		
Cohort: _____ 1 <sup>st</sup> _____ 2 <sup>nd</sup> _____ mid-yr. 2 <sup>nd</sup> _____ 3 <sup>rd</sup>	WSR Model:	Non-WSR Secondary School	
Name of Proposed Particularized Need Program or Service:			
Goal Statement:			
Objective:			
Population:			

#	Activity	Timeline	Budget Description	Budget Amount	GAAP Code & Workpaper	Evaluation Results
1						
2						
3						
4						
5						
6						
7						
8						
9						

**NEW JERSEY DEPARTMENT OF EDUCATION  
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE  
BUDGET SUMMARY**

**NAME OF PROPOSED PROGRAM OR SERVICE TO MEET PARTICULARIZED NEED:**

<b>District</b>	<b>School</b>	<b>County</b>	<b>District Code      School Code</b>

  

EXPENDITURE CATEGORY	FUNCTION / OBJECT CODES	FUNDING SOURCE	2000-2001 BUDGET	EXISTING FUNDS ALLOCATED	FUNDS REALLO-CATED	ADDITIONAL FUNDS REQUESTED
INSTRUCTION	<b>100-</b>					
Salaries of Teachers	100-101					
Other Salaries for Instruction	100-106					
Purchased Prof. & Tech. Serv.	100-300					
Other Pur. Serv. (400-500)	100-500					
Tuition	100-560					
General Supplies	100-610					
Textbooks	100-640					
Other Objects	100-800					
SUBTOTAL INSTRUCTION						
SUPPORT SERVICES	<b>200-</b>					
Sal. Of Supervisors of Instr.	200-102					
Sal. of Program Directors	200-103					
Sal. of Other Prof. Staff	200-104					
Sal. of Secr. & Clerical Assist.	200-105					
Other Salaries	200-110					
Personal Serv. -Benefits	200-200					
Purchased Prof. - Ed. Services	200-320					
Other Purchased Prof. Services	200-330					
Purchased Technical Services	200-340					
Rentals	200-440					
Contr. Servs - Transport. Other Than Betw. Home & School	200-516					
Travel	200-580					
Other Pur. Serv. (400-500)	200-590					
Supplies and Materials	200-600					
Other Objects	200-890					
SUBTOTAL - SUP. SERV.						
FACILITIES ACQ & CONSTR SERV	<b>400-</b>					
Buildings (Use Charge)	400-720					
Instructional Equipment	400-731					
Noninstructional Equipment	400-732					
SUBTOTAL - FAC ACQ 7 CONSTR						
TOTAL						

  

	Funding Source	Estimate	
Resources (Attach a sheet if additional space is needed)			
Existing Resources			
Existing Resources			
Reallocations			
Supplemental Funding Request			
TOTAL			

## SMT REVIEW FORM

### LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE

This form should be used by the SMT to ensure that the plan and budget submitted to the Department of Education (DOE) are complete and comprehensive. DO NOT SUBMIT THIS FORM WITH THE PLAN. Incomplete plans and/or budgets may delay approval or lead to disapproval by the DOE.

	PART. NEED PLAN COMPONENT	QUESTION	YES/NO
1	<b>Cover Page</b>	Are all sections completed correctly?	
2	<b>Board Resolution</b>	Is a Board of Education resolution approving submission of the plan enclosed?	
3	<b>Definition</b>	a. Has a clear and complete definition of the proposed particularized need been included?	
		b. Is adequate documentation provided to establish that the proposed program or service is documented by evidence showing it has worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need with effective results?	
4	<b>Program Description</b>	Is the description adequate and does it contain the following necessary components:	
		a. <b>Explanation of the particularized need that the program or service will address to enable the identified students to achieve the CCCS?</b>	
		b. Description of how the requested program will not delay or impede implementation of, nor duplicate, WSR program, RPSS or other services required in the regulations?	
		c. Description of district's plan for incorporating the program or service into subsequent regular budgeting cycles?	
5	<b>Justification</b>	Does the justification for the particularized need adequately show that the needs cannot be met through existing WSR or RPSS and include the following:	
		a. An inventory and assessment of all such existing programs that have not been already included in the WSR Implementation Plan or RPSS?	
		b. Supporting documentation that confirms the results of the inventory and assessment (hard data)?	
		c. Explanation for each existing program or service as to why it is insufficient to meet the identified need?	
		d. If the application is for health and social services on site, an explanation as to why the program cannot be provided efficiently and effectively off site?	
6	<b>Activity Plan</b>	Does the plan include the following?	
	<b>Goals</b>	a. Appropriate goals?	
	<b>Objectives</b>	b. Measurable objectives?	

	PART. NEED PLAN COMPONENT	QUESTION	YES/NO
	<b>Activities</b>	c. Adequate activities to achieve objectives?	
		d. Adequate timelines to accomplish activities?	
		e. Budget data that corresponds to expenditures on the budget sheet?	
		f. An evaluation measure for accomplishment of each activity and objective?	
	<b>Evaluation</b>	Are the methods used to evaluate progress and outcomes of goals and objectives adequate?	
		Are methods used to evaluate student outcomes adequate?	
<b>7</b>	<b>Budget</b>	Has the following information been completed correctly on the budget page?	
		a. Funding source?	
		b. 2001-2002 Budget	
		c. Existing funds allocated?	
		d. Funds reallocated?	
		e. Additional funds requested?	
		f. How cost-effective is the budget?	
		g. Are all needed supplies and staff included in the budget?	